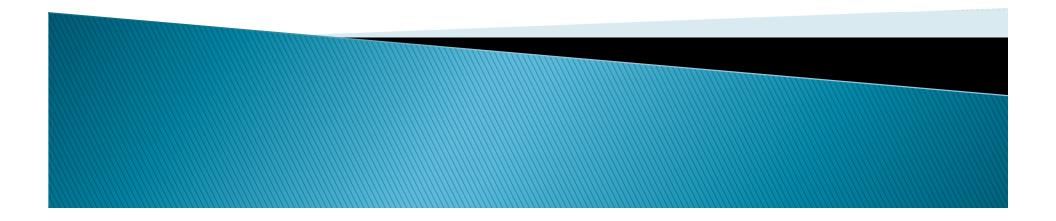
# How do I Give Compassion and Not be Overwhelmed with Emotion?

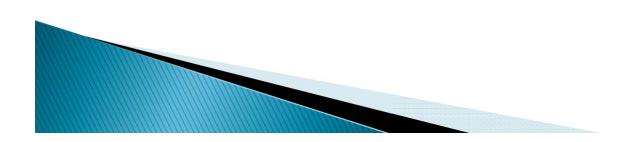
Debbie Ricker, OTR/L, RRD, CDP Life Care Centers of America



# The Aging Body

- Muscles generally become weaker
- Joints stiffen
- Responses begin to slow

#### Disease Processes

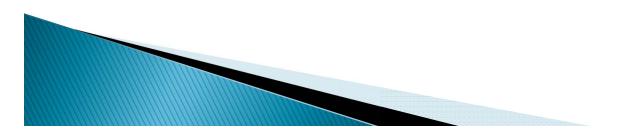


# The Aging Mind

- Concentration
- Momentary confusion
- Faulty decision making
- Problem solving
- Takes longer to learn new things
- Emotional changes
- Personality traits are entrenched

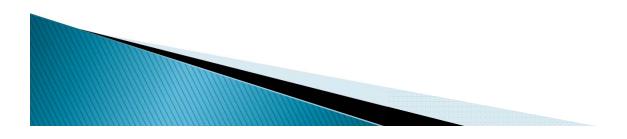
# The Brain With Dementia

- Executive functions are greatly impaired-
  - Problem solving, decision making, judgment, self regulation, planning, follow through
- Functional skills are impaired ADLs (bathing, dressing, eating); IADLs (paying bills, driving, cleaning house)



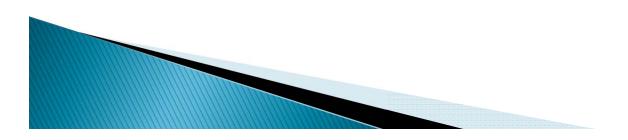
# Behavior IS Communication

- > 90% of patients with dementia
- Behaviors biting, kicking, pinching, spitting, refusal to cooperate with medical procedures
- Usually caused by staff
- Approach is of utmost importance



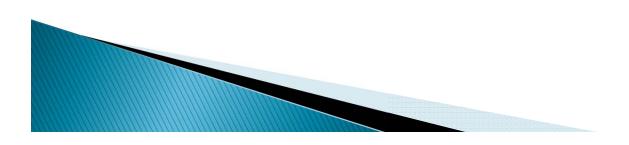
#### **Effective Communication**

# Distraction Reminiscing Validation Therapy



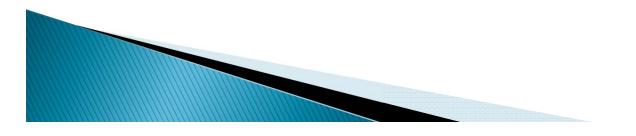
# **Effective Approaches**

 Get into their world
 Don't take their attitude/demeanor/words personally



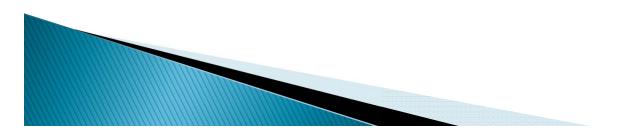
# Need For Compassion

- Care of the patient is both science and art
- Competent application of science
- The art of being attentively present to the patient which promotes wellbeing, security, treatment adherence, and healing
- Intentional action to relieve suffering



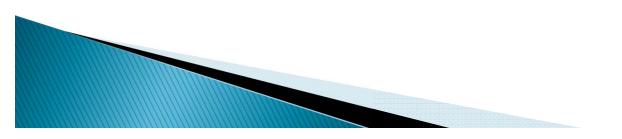
# Benefits of Compassion to You

- Costs nothing
- Fills us with resilience and hope
- Enables staff to respond to patient's needs
- Encourages positive care practices
- Recognize stars or champions who are change agents



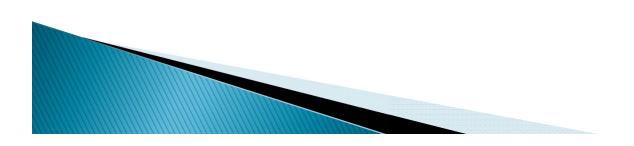
#### Positives

- Can be acquired or developed
- Used as an assessment model for the art of medicine and application of wisdom
- Holistic approach
- Become routine behaviors
- Staff are the driving force of compassionate care



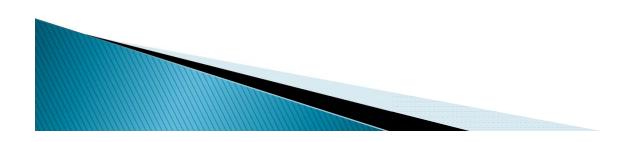
#### Beneficiaries of Compassionate Care

- Clinicians, nurses, therapists, and other staff
- 2. Students and interns
- 3. Patients
- 4. Economic benefit to the company



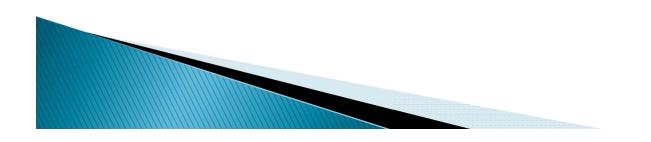
# **Compassion Fatigue**

Most at risk
Intensive care
Mental health
Pediatrics
Oncology
Dementia



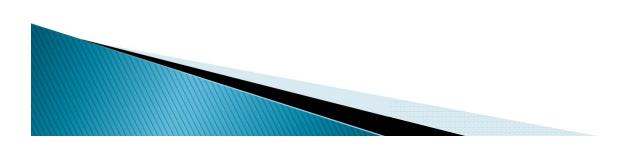
#### Burnout

- "A syndrome of emotional exhaustion, depersonalization, and reduced accomplishments that can occur among individuals who do 'people work' of some kind". (Maslach & Jackson, 1986, p.1)
   Possible factors:
- Personality characteristic
- Work related attitudes
- Work/organizational characteristics



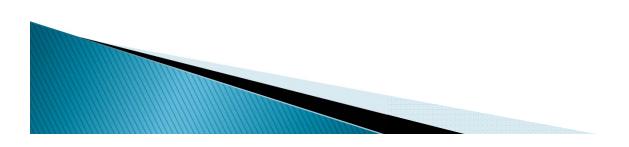
# **Personality Traits**

- Type A personalities
- Coping styles
  - Escape-avoidance, problem solving, confrontation
- The 'Big Five'
  - Neuroticism
  - Extroversion
  - Openness to experience
  - Being agreeable
  - conscientiousness



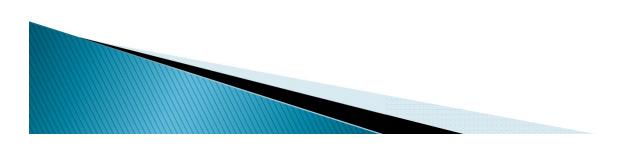
# Work Related Attitudes

- Idealistic expectations
- Nurses' expectation that providing a certain level of care will lead to a positive outcome for every patient
- Incongruence between nurses' values and beliefs
  - Philosophy of care and organization's vision and values



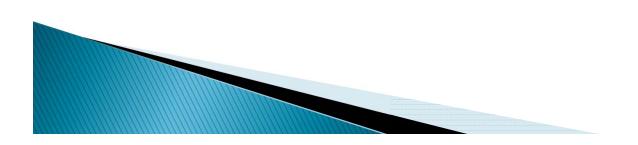
# Job-Related Stressors

- Patient to nurse ratio
- Client-related stressors- increased patient acuity and complexity
- Social support factors education, collaboration, and support
- Degree of autonomy- retain control over decision making related to care



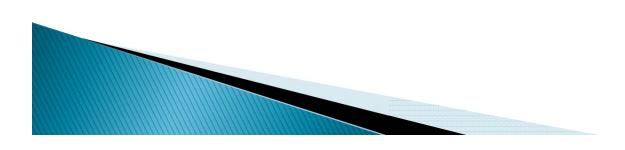
# **Compassion Fatigue**

- (Secondary Traumatic Stress)
- Natural consequent behaviors and emotions resulting from knowing about a traumatizing event experienced by a significant other- the stress resulting from helping, or wanting to help, a traumatized or suffering person".
- (Figley, 1995, p. 7)
- Suffering of the patient triggers a response, on multiple levels, in the provider



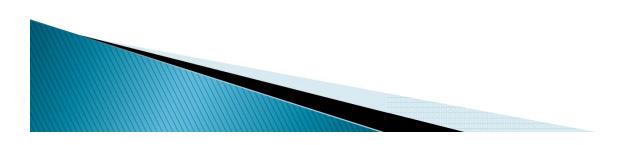
# Risk of Compassion Fatigue

- Increases if:
- 1. Ongoing exposure to suffering
- 2. Nurse has memories that elicit an emotional response
- Unexpected disruptions in her/his life



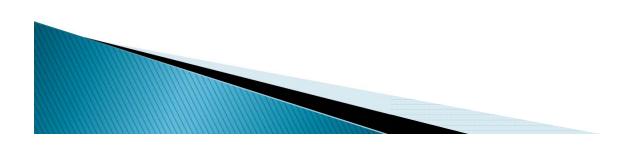
#### Compassion

- Nurse's ability to pick up on individual's feelings:
  - Higher perception
  - Helper communication
  - Client perception
- (La Monica, 2001)



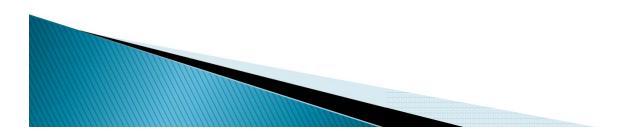
# Resilience

- Capacity to move forward in a positive way from negative, traumatic, or stressful experiences (Walsh, 2006)
- Benefits:
- Enhance relationships
- Facilitate emotional insight
- Decrease vulnerability to adverse effects from the work environment
- (Jackson, Firtko, & Edenborough, 2007)



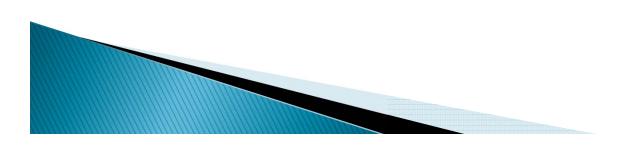
#### **Protective Mechanisms**

# Share your stories and experiences



# **Compassion Fatigue**

- High levels of empathy and empathic response to a patient's pain, suffering, or traumatic experience create more vulnerability
- (Adams, et al., 2006; Figley, 2002b)
- Key factors empathic ability, empathic response may result in residual compassion stress
- (Adams, et al., 2006; Figley, 2002a)

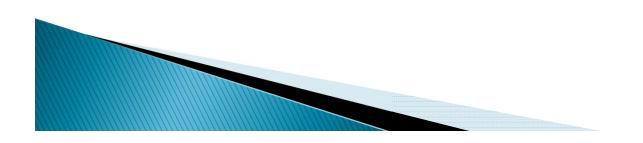


#### Vicarious Traumatization

Negative transformation in the therapist's (or other trauma worker's) inner experience resulting from empathic engagement with clients' trauma material"

• (Pearlman & Saakvitne, 1995b, p. 151)

Results in the permanent disruption of the individual's cognitive framework



#### Vicarious Traumatization

- Ongoing exposure to graphic accounts of human cruelty, trauma, and suffering
- May leave healthcare workers more vulnerable

• (Dunkley & Whelan, 2006)



#### Characteristics of Healthcare Professionals

- Personal history of abuse and/or personal life stressors
- Personal expectations
- Need to fulfill all patient needs
- Inadequate training
- Inexperience



#### Characteristics of the Treatment

- Invasiveness
- Life-threatening nature
- Long term effects

Context

- Type of patient
- Political, social, and cultural context within which the treatment occurred
- Ongoing advances in medical technology
- Keep patients alive for longer periods of time
- Eventual outcome is not altered
- (Pearlman & Maclan, 1995)

#### **Constructivist Self Development Theory (CSDT)**

One's unique history :

- Experience
- Interpret
- Adapt to traumatic or highly stressful events
   Unique to each individual
- Example- if a nurse grew up in home that used escape/avoidance
- Likely would use this negative coping strategy in other stressful situations
- (Saakvitne, Tennen, & Affleck, 1998)

# 5 Core Areas of Need

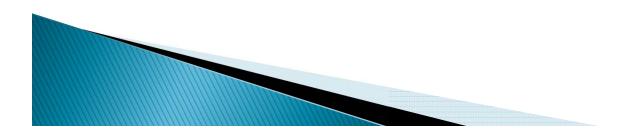
- Safety
- Trust
- Esteem
- Control
- Intimacy

All of these can be disrupted by exposure to trauma

(McCann & Pearlman, 1990)

# Example

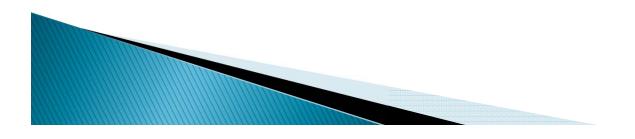
- Nurse in MASH unit- 1<sup>st</sup> hand observation, or listen to patient describe trauma
- May experience the following:
- Difficulty establishing and maintaining relationships with others
- Loss of independence
- Inability to tolerate extreme emotional responses to stressful situations
- Intrusive memories of the traumatic experience
- Altered belief system



# CSDT

Importance of individual's ability to:

- Connect with others
- Perceive the self as competent
- Cope effectively with stress over time
- Interpret experiences in a meaningful way
- Allows individual to draw on previous experience to manage new experiences successfully
- (McCann & Pearlman,1990)



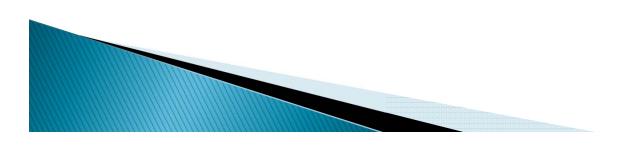
#### Important Aspects

- Hematological cancer nurse
- Believes all patients will die
- Vs.
- Recognizes cues to be able to predict the progression of the disease, rather than "all patients will progress in the same way"

\*\*\*Not every person who works with those traumatized will develop vicarious traumatization

#### Burnout

- Sate of emotional, mental, and physical exhaustion caused by excessive and prolonged stress
- Feel overwhelmed and unable to meet constant demands
- As stress continues, you begin to lose interest or motivation that led you to take the job in the first place



#### Burnout

- Reduces your productivity
- Saps your energy
- Leaves you feeling increasingly helpless, hopeless, cynical, and resentful
- Eventually you feel like you have nothing more to give



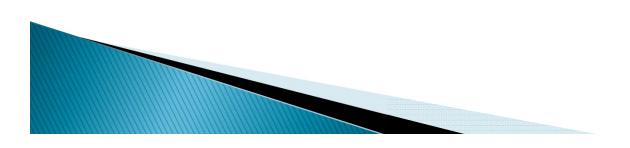
#### **Could You Have Burnout?**

- Have you become cynical/critical at work?
- Do you drag yourself to work and have trouble getting started once you arrive?
- Have you become irritable with co-workers, customers, or clients?
- Do you lack the energy to be consistently productive?
- Do you lack satisfaction from your achievements?



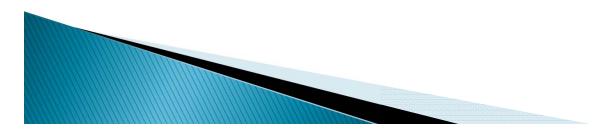
## **Could You Have Burnout?**

- Do you feel disillusioned with your job?
- Are you using food, drugs, or alcohol to feel better or to simply not feel?
- Have your sleeping habits or appetite changed?
- Are you troubled by unexplained headaches, backaches, or other physical complaints?



#### Causes

- Lack of control
- Unclear job expectations
- Dysfunctional workplace dynamics
- Mismatch in values
- Poor job fit
- Extremes of activities monotonous or chaotic
- Lack of social support
- Work-life imbalance



### **Risk Factors**

- Identify strongly with worklack balance
- Try to be everything to everyone
- Work in a helping profession
  Feel you have little or no control over your work

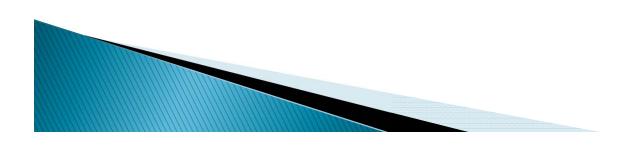
# Consequences

- Excessive stress
- Fatigue
- Insomnia
- Negative spillover into personal relationships/home life
- Depression
- Anxiety
- Alcohol or substance abuse
- Heart disease



### Consequences

- High cholesterol
- Type 2 diabetes, especially in women
- Stroke
- Obesity
- Vulnerability to illnesses



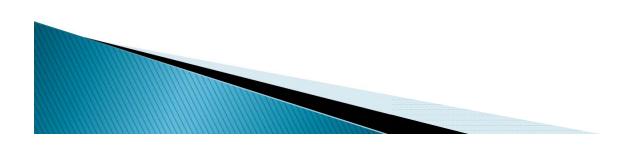
# Work Related Burnout

- Feel like you have little or no control over your work
- Lack of recognition or rewards for good work
- Unclear or overly demanding job expectations
- Doing work that's monotonous or unchallenging
- Working in a chaotic or high-pressure environment



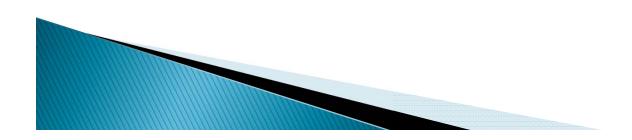
# Lifestyle Related

- Working too much, without enough time for relaxing and socializing
- Being expected to be too many things to too many people
- Taking on too many responsibilities, without enough help from others
- Not getting enough sleep
- Lack of close, supportive relationships



# **Personality Traits**

- Perfectionist
- Pessimist
- Need to be on control
- Reluctant to delegate
- High achieving, Type A personality



### On The Road to Burnout

- Every day is a bad day
- Caring about your work or home life seems like a total waste of energy
- You're exhausted all the time
- Majority of your day is spent on tasks you find either mind-numbingly dull or overwhelming
- Feel nothing you do makes a difference or is appreciated

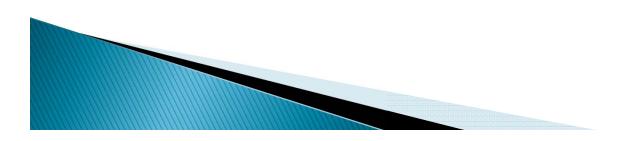


### Burnout

- Provides a fertile ground for the development of compassion fatigue and vicarious traumatization
- Hallmark signs:
- Anger and frustration
- Fatigue
- Negative reactions toward others
- Cynicism
- Negativity
- Withdrawal

# Strategies of Coping

Recognize
Reverse
Resilience



### Difference Between Stress and Burnout

#### Stress

- Over-engagement
- Emotions are over reactive
- Urgency and hyperactivity
- Loss of energy
- Leads to anxiety disorders

#### Burnout

- Disengagement
- Emotions are blunted
- Produces helplessness
- Hopelessness
- Loss of motivation, ideals, hope
- Detachment
- Depression

#### Stress

#### Burnout

### Stress vs. Burnout

#### Stress

- Primary damage is physical
- May kill you prematurely

Burnout

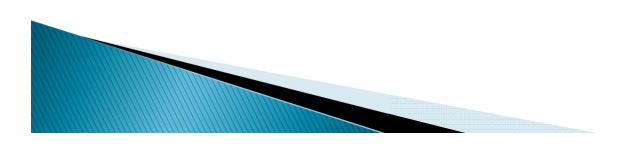
- Primary damage is emotional
- May make life seem not worth living

#### Stress

#### Burnout

### Prevention

- Start the day with a relaxing ritual
- Adopt healthy eating, exercising, and sleeping habits
- Set boundaries
- Take a daily break from technology
- Nourish your creative side
- Learn how to manage stress



# Recovery

- Slow down
- Get support
- Reevaluate your goals and priorities
- Acknowledge your losses
- The dream of your career
- Identity
- Physical and emotional energy
- Friends, fun, sense of community
- Joy, meaning, purpose that make life worthwhile

# Coping Actively address problems Clarify your job description Ask for new duties Take time off

# Coping

- Manage the stressors that contribute to burnout
- Evaluate your options
- Adjust your attitude
- Seek support
- Assess your interests, skills, and passions
- Get some exercise



### Resources

- Mayo Clinic
- Mary Prendergast, MD
- Robert McClure
- Brenda Sabo, PhD, RN
- Stephen G. Post, PhD

